10690503

Application or Docket Number													xer	
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 C 69050														
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THE (Column 1) (Column 2). TYPE C OR SMALL ENT														
0	TAL CLAIMS		-1	-15				RAT	E	FEE		RATE	FEE	
_			MANGER	NAMEER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00	
OF	TAL CHARGEA	RI E CLAIMS	> minus 20=		• 11			XS S	=	48.	OR	X\$18=		
_	EPENDENT CL			3 minus 3 =		• 0		X43	<u>=</u>		OR	X86=		
-	TIPLE DEPEN							+14	=		OR	+290=		
• If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL Q & OR												TOTAL		
OLANIC AS AMENDED - PART II											OR	OTHER THAN R SMALL ENTITY		
(Column 2) (Column 3)													ADDI-	
<u>,</u>	11111	CLAIMS REMAINING		NUI	ŒST IBER DUSLY	PRESENT EXTRA	1	RAT		ADDI- TIONAL FEE		RATE	TIONAL	
		AFTER ALENDMENT		PALD	FOR	-1/	1	XS!)=	rec.	OR	X\$18=		
	Total	• 3 1	Minus		Je L	1		X43	=		OR	VOC-		
	Independent	NTATION OF	WULTIPLE DE	PENDEN	T CLAIM]	+14			OR	.000		
									ITAL		OR	YOUL		
ADOIT FEE												ADDIT. PER		
(Column 1) (Column 2) (Column 3) ADDI-											ADD1-			
0	5/16/05	CLAIMS REMAINING AFTER		PREV	UBER TOUSLY	PRESENT EXTRA		RAT	E	TIONAL		RATE	TIONAL FEE	
AMENDWEN	Total	AMENDMENT	Minus	- /	37	- 0].	XS	9=		OR	X\$18a		
ובשו	Independent	1. 2	Minus	***	4	- ()		X4]c		OR	X86a		
2 4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+14	5=		OR	+290=		
								ADDIT.	TAL		JOR	ADDIT. FEE		
		•		cr-a-l	2l	(Column S	3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
_	-	(Column 1	}	HIG	HEST		7			ADDI-	1		ADDI-	
U T		REMAINING		PRE	MBER MOUSLY DEOR	PRESENT		RATE	TE .	TIONAL		RATE	TIONAL	
MER		AMENDMEN	Minus	PA	37_	- 0	7	xs	9=	7	RO	X\$18=		
ENDIAL	Total Independent	1. 2	Mirus	***	4	- 0		XA	3=	1/	OR	X88-		
AME	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					J	 	<u> </u>	1/:	1		17		
_		7.						+14	5 -	/	RO		¥	
•	it the entry in ca.	unn I is less tha	n the entry in o	parts 2, w	to The	denna.	20.	ADOIT	574		OR	ADDIT. FE		
-											er in s		•	
	for the Thir care in	nter Previously	Peid For (Total	or Indepo	ndent) is &	e highest hus		ر الد شاهان				•		